

# CLAIMS ONLY

Application Number

10/46 10/643614

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1		1		1	
2		1		1		1
3		1		1		1
4		1		1		1
5		1		1		1
6		1		1		1
7		1		1		1
8		1		1		1
9		1		1		1
10		1		1		1
11		1		1		1
12		1		1		1
13		1		1		1
14		1		1		1
15	1		1		1	
16			1		1	
17			1		1	
18			1		1	
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Total indep	2		5		5	
Total depend	13		15		15	
Total claims	15		20		20	

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	Indep	Depend	Indep	Depend	Indep	Depend
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100						
Total indep						
Total depend						
Total Claims						